



## START WORK

CSO/WORKER NAME	TELEPHONE NUMBER
CLIENT IDENTIFICATION NUMBER	DATE

### SECTION A: You must answer all of the questions in this box for your new job.

1. What is your name? **Please print clearly:** \_\_\_\_\_
2. What is the name of the company that hired you: \_\_\_\_\_  
Supervisor/contact person: \_\_\_\_\_  
Contact telephone number: \_\_\_\_\_
3. What kind of work will you be doing? \_\_\_\_\_
4. What date do/did you start working? \_\_\_\_\_
5. Can you get health or dental insurance on your job? ☐ Yes ☐ No
6. Do you use childcare? ☐ Yes ☐ No

If you will be doing agricultural work or farm-work on your new job, go to SECTION C (next page).

If you will be doing self-employment on your new job, go to SECTION D (next page).

If you are doing any other type of work, go to Section B. below.

### SECTION B: Answer as many of these questions as you can. If you don't know the answer, leave it blank.

1. Are you working: ? ☐ Part time ☐ Full time ☐ Temporary/seasonal  
If this is a temporary/seasonal job, when do you expect it to end? \_\_\_\_\_
2. How many hours do you work per week? \_\_\_\_\_
3. How much are you paid? For example, are you paid \$7.50 per hour, or \$800 per month? \_\_\_\_\_
4. When are you paid? For example, are you paid every week, every other week, or twice a month? If paid on a specific day of the week, be sure to tell us what day: \_\_\_\_\_
5. When does the pay period begin? \_\_\_\_\_ When does it end? \_\_\_\_\_
6. When did you/will you receive your first paycheck? \_\_\_\_\_
7. Which of the following apply, if any: ☐ You get tips ☐ You get overtime ☐ You get bonuses  
☐ You get commission ☐ Employer pays rent ☐ Employer provides meals  
How much? \_\_\_\_\_ How often? \_\_\_\_\_
8. Are there going to be any changes in your job in the next couple of months? ☐ Yes ☐ No  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STOP. Do not fill out this form unless you have already filled out SECTION A on the other side.**

**SECTION C: If this job is agricultural or farm work, answer all the questions in this section.**

1. What kind of crop are you working with? \_\_\_\_\_
2. How much are you paid? For example, are you paid \$8/bin, \$7/tree, 25 cents/pound, \$4/box, or \$7/hour?  
\_\_\_\_\_
3. How many hours do you work per day? \_\_\_\_\_ How many days per week? \_\_\_\_\_
4. When will this job end? \_\_\_\_\_
5. What social Security Number are you working under at this job? \_\_\_\_\_
6. Do you get overtime? ☐ Yes ☐ No  
If yes, how much? \_\_\_\_\_ If yes, how often? \_\_\_\_\_
7. Do you get bonuses? ☐ Yes ☐ No  
If yes, how much? \_\_\_\_\_ If yes, how often? \_\_\_\_\_
8. Does your employer pay any part of your rent? ☐ Yes ☐ No  
If yes, how much? \_\_\_\_\_
9. Are you also working at another farm? ☐ Yes ☐ No **If yes, you must complete another Start work form.**
10. Do you have another job lined up when this one stops? ☐ Yes ☐ No  
If yes, when will it start? \_\_\_\_\_

**SECTION D: If you are self-employed, answer all of the questions in this section.**

1. What kind of work are you doing? \_\_\_\_\_
2. Who pays you? \_\_\_\_\_
3. How many hours do you expect to work each week? \_\_\_\_\_
4. How much do you expect to make each month before taxes and expenses? This amount should include any tips or commissions you may receive: \_\_\_\_\_
5. Does someone else pay any part of your rent? ☐ Yes ☐ No If yes, how much? \_\_\_\_\_
6. Are your business expenses more than \$100 each month? ☐ Yes ☐ No  
**We allow a standard business expense of \$100. If you would like to claim a higher deduction, you must itemize your expenses and give us proof of them before we can use them.**

**Read the following and sign the form.**

**I declare under penalty of perjury under the laws of the State of Washington that the information in this report is true and correct as far as I know.**

SIGNATURE	DATE	TELEPHONE NUMBER
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